SPECIAL MEETING NOTIFICATION REQUEST FORM

In accordance with the state's Open Meeting file, a written request form for anyone want of the Taylorsville City Commission. In order complete the information below and ret Taylorsville Road, P.O. Box 279, Taylorsville, email the form to Steve Biven, City Cle	ing to be notified of Special Meetings for you to be notified properly please urn it to Taylorsville City Hall, 70 KY 40071, fax to (502) 477-1310, or
Anyone that does not have a written form or of upcoming meetings of the Commission. The	•
I	acknowledge
my preference to be notified	by email when Special
Meetings of the Taylorsville	•
held. My email address is:	City Commission are
_	
	(Signature)
-	(Date)